

Foster Family Home - Corrective Action Report

Provider ID: 1-140063

Home Name: Rosalinda C. Alfaro, CNA

Review ID: 1-140063-7

1268 Glen Avenue

Reviewer: Maribel Nakamine

Wahiawa HI 96786

Begin Date: 8/24/2020

Foster Family Home Required Certificate [11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Annual visit to a 2 person CCFFH completed.

Corrective Action Report issued during home visit with all items due to CTA by 9/24/2020.

6.(d)(1)- see applicable sections of the review

Foster Family Home Background Checks [11-800-8]

8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(1), (2)- CG#3's APS/CAN/Fingerprint lapsed on 6/3/2020 and renewed on 8/7/2020. HHM #2's APS/CAN/Fingerprint lapsed on 5/8/2020 and renewed on 5/21/2020.

Foster Family Home Physical Environment [11-800-49]

49.(a)(4) Wheelchair accessibility to sleeping rooms, bathrooms, common areas and exits, as appropriate;

Comment:

49.(a)(4)- Back exit door pathway on the outside (located in the kitchen) are obstructed with multiple household items, an animal cage, etc. preventing a safe/wheelchair to pass through in the event of an emergency.

Foster Family Home Client Rights [11-800-53]

53.(b)(9) Be treated with understanding, respect, and full consideration of the client's dignity and individuality, including privacy in treatment and in care of the client's personal needs;

Comment:

53.(b)(9)- Client #1 and Client #2's doorknobs locks are on the outside. Under the My Choice My Way, client needs to be able to lock the bedroom from the inside for privacy.

Maribel Nakamine, RN

Compliance Manager

Rosalinda C. Alfaro

Primary Care Giver

8/24/2020

Date

8/24/2020

Date

CTA RN Compliance Manager: Maribel Nakamine

Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-600

PCG's Name on CCFFH Certificate: Rosalinda Alfaro

(PLEASE PRINT)

CCFFH Address: 1268 Glen Avenue, Wahiawa, HI 96786

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8.(a) (1), (2)	Lapse cannot be corrected.	8/24/20	Home will use an iphone calendar to schedule due dates alerts 2-3 months in advance to prevent future lapses.
49.(a) (4)	Home cleared all items that were obstructing the back door emergency exit.	9/1/20	All household members and caregivers will keep all emergency exit doors pathway cleared at all items for everyone's safety.
53.(b) (9)	Home changed door locks to the inside for client's privacy.	9/1/20	Home will adhere to the rules and regulations of the My Choice My Way in regards to client's privacy rights.

☒ All items that were fixed are attached to this CAP

PCG's Signature: Rosalinda O. Alfaro

Date: 8/31/20

☒ CTA has reviewed all corrected items